



CANDIDATE
POLITICAL INQUIRY FORM

WWJ / Detroit

SPECIAL () PRIMARY ☒ GENERAL () OUT OF WINDOW ()

RECORD OF REQUEST Candidate Broadcast Time Planning Rates out of Window

NAME OF REQUESTOR:

1. NAME OF AD AGENCY:

Shanelle Jackson for Congress

2. ORGANIZATION PAYING FOR TIME:

Shanelle Jackson for Congress

Shanellejackson@hotmail.com

3. ORGANIZATION FURNISHING TAPES:

Same as Item 1

4. BROADCAST TO FAVOR ISSUE/BALLOT/CANDIDATE:

5. PRODUCT OR CATEGORY:

6. POLITICAL PARTY OR OFFICIAL AFFILIATION:

DATE OF REQUEST 8/3/12

NATURE OF REQUEST:

- (a) Request for CANDIDATE rate card
(b) Other request as stated below

7. DISPOSITION MADE OF REQUEST

- (a) Granted
(b) Denied (reason)
(c) Withdrawn (reason)
(d) Avals offered

8. SUBSEQUENT DEVELOPMENTS

9. AMOUNT OF CHARGES - see order (s) under candidate name in public file folder

CBS EMPLOYEE COMPLETING FORM